POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	BA		05-04-01
O.I.P.E. CLASSIFIER			10-11
FORMALITY REVIEW	H-S	866	07-59-01
RESPONSE FORMALITY REVIEW	Tedward	925	03-06-02

INDEX OF CLAIMS

✔	...... Rejected	N	...... Non-elected
=	...... Allowed	I	...... Interference
—	(Through numeral)... Canceled	A	...... Appeal
÷	...... Restricted	O	...... Objected

Claim (Final / Original)	Date										
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	14	14	03								
	03	03	04								
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If more than 150 claims or 10 actions
staple additional sheet here

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